SURGICALTECH

Essentials needed to perform with organized precision and skill in the operating room



INTRODUCTION

- Surgical technologist (a.k.a. "scrub" or "scrub tech").
 - An allied bookh professional and sterile surgical team momber who has completed a CAAHEPaccredited (or equivalent) program; required:
 - Basic knowledge of medical terminology, anatomy. physiology, microbiology, and pharmacology to apply while in the operating room (OR) • Vast knowledge of sterile technique, surgical

instruments, and surgical supplies to apply while protecting the sterile supplies from contamination within the sterile workspace

- Certified surgical technologist (CST).
 - Surgical technologist who has completed a CAAHEP-accredited program (or the equivalent)
 - and has passed the NBSTSA certification exam-
 - Once a CST has obtained NBSTSA certification, the CST must gither;
 - 5 Obtain and report at least 30 continuing education
- units (CEU) every two years through ASTapproved sources and submit the efficial renewal form and for to NRSTSA.
- 9 Renew cortification by retaking and passing NUSTSA's CST exam

Note: Some states and employers require certification. for employment. Visit www.ast.org for an everview of state laws related to the education/certification of surgical technologists.

OPERATING ROOM (OR) TEAM



- Goals Assist in optimal patient care
- · Motto: "Aeger primo" (putient first): Sterile Members

- Surgical technicism: See Surgical Tech Dutles, right
- · Surgeon: Performs the procedure.

maintains homeostasis, and directs the

 Surgeon's assistant: Collaborates with the surgeon during the surgical procedure to provide visualization, homostasis, wound closure, and potient. **CARRY**

Sonsterile Members

- Amesthesia provider: Sedates the potiont, maintains the airway, and monitors vital signs and blood less to maintain homopetasis
- Circulator: Ensures all perioperative protocols are completed, such as propping and positioning the patient. charting patient information while in the OR, distributing monsterile items, and obtaining/opening storile supplies for the storile team with the storile technique during a surgical procedure
- Ancillary staff (nathology, radiology, etc.)e Processes, tests, and analyzes specimens and reports results; provides real-time disensatic support during the surgical procedure.

Surgical lech Outles Perioperative Buties

Time management.

- Organization
- Critical thinking Stripus management
- Townswork;
- Patient care

Preoperative Duties

- Prepare the Off with case-specific sterile and nonsterile surgical supplies
- Commission surreignal speach and does a: storile surgical gown and sterile gloves
- · Organize sterile supplies using sterile technique, including labeling medications and other sterile solutions
- Complete mandatory counts of supplies within the sterile workspace for each surgical case including, but not limited to, sponges, sharps, and instruments
- · Assist in draping patient with sterile terchediane.
- Complete WHO-required "sign in" and time out" with the OR town

Intraoperative Duties

- Maintain storile technique within storile field with all other sterile and nonsterile Accesses increased because
- · Recognize and correct breaks in steribity without All thery eventure
- · Follow along with the sequence of the case and anticipate the needs of the

- surgeon and surgical assistant
- · Prepare and pass all sterile supplies to the surpeon and surplead assistant
- · Blold organs and retractors
- · Care for specimens (if obtained) until surpoon gives a specific plan of action.
- Complete intraoperative supply counts (sponges, sharps, instruments, accessories, etc.)

Postpoerative Duties

- Complete postoperative supply counts (sponges, sharps, instruments, approximates, etc.):
- · Complete WHO "sign out" with the COR Season
- · Assist with dressing the wound.
- · Maintain sterility of supplies until patient leaves the Off.
- · After potiont leaves the OR, break down the case into respective supply receptacles (sharps container, biolassant container, garbage, biness, etc.).
- Take used surgical case supplies. to deviamated area within the OR department for disposal, cleaning, or encollistation.
- · Assist in cleaning the OR for the next owns landgram

CST-ASSOCIATED ORGANIZATIONS

- National Board of Surgical Technology and Surgical Assisting (NBSTSA, www. abstra regic Develops the certification exam and verifies, genews, and revokes credentials of surgical technologists and surgical assistants
- Commission on Accreditation of Allied Braith Education Programs (CAAIIEP. www.cashep.orgle.Largest programmatic accreditor of the health science professions
- Association of Surgical Technologists (AST, www.ast.org): Upholds the standards of practice for patient care and the profession
- The CST must renew AST membership annually:
- The Joint Commission (TPC, www.jointcommission.org); Independent conprofit organization that sets standards and accredits/certifies health-care facilities that meet or exceed safe and effective care of the highest quality and value
- Occupational Safety and Health Administration (OSHA, www.osks.gov): Ensures. safe and healthy working conditions for employees and potionts by setting and enforcing standards through training, conveach, education, and assistance
- World Health Organization (WISO, was who into Global health organization that establishes, monitors, and enforces international norms and standards of booth and discusse

MEDICAL TERMINOLOGY USED IN THE OR

- · Sterillet Free of all living microorganisms
- Stertile technique: Specific practices and procedures. performed to protect a designated area or supplies used to prevent the contamination and spread of pathogens. and ensistain steribley
 - Strike through contamination: Contamination of a sterile surface or object that occurs when third passes through a microbial barrier or nonsterile
- Surgical site infection (SSI): Infection acquired. in a surgical wound from the healing process or
- Contaminate: To infect by contact or association with gronbrogranic menorials.

- Decontaminate: To sid of contamination
- Nonsterile: Not free from living microorganisms; not
- Perioperative: The entire operative sequence for a specific operative case and patient care procedures.
 - Preoperative (pre-op): Beginning of the operative sequence of supplies entering the OR until the first incision is made or orifice entered
- Intrasperative (intra-op)e Actual surgical procedure from the first incision/orifice entered until the last stitch is complete or orifice exited.
- Postoperative (post-op): Conclusion of the surgical procedure from the dressing of the wound until the putient leaves the OS;
- Surgical conscionor: Putting the potient first by doing what is moral and just at all times; the surgical tockmologist must:

- Accept and maintain patient confidentiality
- Ensure the safety of everyone in the OR, Be practical with medical supplies, cost, and time
- Maintain sterile practices and hold team members separantable.
- Prevent any and all contaminations.
- Be attentive to the patient's scheduled time in the OR. during perioporative services.
- Conduct productive and professional communication



Study Guide Surgical Tech

Association of Surgical Technologists
Staff,Bob L Caruthers,Paul Price,Teri L
Junge

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Surgical Tech Certification Study Guide Pasquale De Marco, 2025-04-28 Embark on an educational journey into the realm of surgical technology with this comprehensive guide meticulously crafted for aspiring and practicing surgical technologists Within these pages you will find an in depth exploration of the intricate procedures and techniques that ensure the safety and well being of patients undergoing surgery As you delve into the chapters you will gain a thorough understanding of the surgical environment encompassing the specialized equipment instrumentation and sterilization techniques that uphold the highest standards of asepsis Moreover you will delve into the nuances of preoperative care encompassing patient assessment preparation and informed consent ensuring that patients are adequately prepared for surgery Furthermore this guide unveils the intricacies of intraoperative care guiding you through the meticulous steps of scrubbing gowning draping and positioning the patient You will master the art of monitoring the patient's vital signs anticipating potential complications and assisting the surgeon with precision and dexterity Beyond the operating room this book explores the multifaceted role of the surgical technologist in postoperative care emphasizing the importance of pain management wound care and patient education It also delves into the realm of surgical emergencies equipping you with the knowledge and skills to respond effectively to unforeseen circumstances This comprehensive resource extends its reach to encompass legal and ethical considerations in surgical practice ensuring that you navigate the complexities of patient rights informed consent confidentiality and medical malpractice with integrity and professionalism Additionally it explores the avenues for professional development highlighting the significance of continuing education certification and networking in advancing your career as a surgical technologist Enrich your knowledge and elevate your skills with this indispensable guide empowering you to excel in your role as a surgical technologist and contribute to the delivery of exceptional patient care If you like this book write a review on google Appleton & Lange Review for the Surgical Technology Examination: Fifth Edition Nancy M. Allmers, Joan Ann books Verderame, 2004 More questions and answers than any review of surgical technology on the market With over 1 500

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